



2024-25 Institutional Verification Worksheet – V4 Dependent

(Contact: V4_Group)

IMPORTANT: Your FAFSA was selected by the U.S. Department of Education for a process called verification. The verification process will be conducted by Kansas Wesleyan University in accordance with U.S. Department of Education’s rules 34 CFR, Part 668.

We must collect this information before awarding federal Financial Aid. No further processing will be done until all documentation is provided.

SECTION A: STUDEN INFORMATION

Student Last Name	First	Middle	KWU Student ID # or Social Security Number	Date
Student Email address			Student Cell Phone number	

SECTION B: STUDENT HIGH SCHOOL COMPLETION (We need your 2022 tax information for parents & student)

Please select the box below for the statement which best describes you:

<input type="checkbox"/>	I DID graduate from High School and have a high school diploma.	Office Use Only: HS Transcript Ok: Yes or No IF NO: <input type="checkbox"/> HS Transcript Requested from HS <input type="checkbox"/> Dt _____ <input type="checkbox"/> Aid Placed on Hold <input type="checkbox"/> HS Transcript received Dt _____ <input type="checkbox"/> HS Transcript Ok: Yes or No
<input type="checkbox"/>	I DID receive a GED.	
<input type="checkbox"/>	I DID graduate from a home school program.	
<input type="checkbox"/>	I DID NOT receive a high school diploma or its equivalent from any of the above sources.	

If you graduated from high school, a home school program, or received a GED, your application and admission file will be reviewed for documentation appropriate to satisfy this federal requirement. If additional documents are needed, the Office of Student Financial Planning will email you at your KWU email account. If you were admitted with 24 or more semester hours, please have your official high school transcript or GED forwarded to the KWU Office of Student Financial Planning.

SECTION C: SIGNATURES (We need your 2022 tax information for parents & student)

By signing this worksheet, I (we) certify that all information reported to qualify for federal student aid is complete and correct. At least one parent included on the 24-25 FAFSA must sign.

Student Signature	Date	Parent Signature	Date
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Parent Contact Information: The Office of Student Financial Planning will use this information to contact the parent to quickly resolve questions to prevent delays in processing your awards.
Parent Name:
Parent Email Address:
Parent Cell Phone: ()



SECTION D: IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE

(To be completed in front of a Student Financial Planning Representative or Notary Public)

INSTRUCTIONS FOR SUBMISSION OF THIS FORM: (Please read carefully.)

Option 1: Present this form IN PERSON to the Kansas Wesleyan University Office of Student Financial Planning along with an unexpired valid, government-issued photo identification (i.e. driver's license, state-issued photo identification, military identification, or passport). If you present this form in person to the KWU Office of Student Financial Planning, we will maintain a copy of your government photo identification and date received and name of official who collected it.

Option 2: If you are unable to present this form in person to KWU Office of Student Financial Planning, you MUST SIGN BELOW IN THE PRESENCE OF A NOTARY PUBLIC to have this form notarized. Notary publics can typically be found at banking institutions and government offices such as your local County Clerk.

IMPORTANT: Please read and sign the Statement of Educational Purpose below indicating that the statement and all other information contained on this worksheet is true and correct. WARNING! If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a federal fine, a prison sentence, or both. By signing this statement, you certify that all the information reported in and for this student's application for financial aid is complete and accurate.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____ am the individual signing this Statement
(Print Student's Name)

of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Kansas Wesleyan University for 2024-25.

Student Signature

Date

Student ID Number

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

(for those unable to appear in person in the KWU Student Financial Planning Office)

State of _____, City/County of _____

On this date of _____, before me (notary's name), _____,

personally appeared (name of person signing this form) _____,

and proved to me on basis of satisfactory evidence of identification (type of government-issued photo ID provided)

_____ to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal:

My commission expires on:

Notary Public's Signature

Date

KWU SFA ONLY:

Government ID accepted by _____ Date: _____

Attach photocopy of student's government Issued ID.

Entered on FAA Access-On-Line on Date _____ by Initials _____

Attach FAA Access On Line print-out.